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nine months TO GET READY....

YOU CAN MAKE A DIFFERENCE

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ARIZONA DEPARTMENT OF HEALTH SERVICES
dhs

PRENATAL EDUCATIONAL PACKAGE

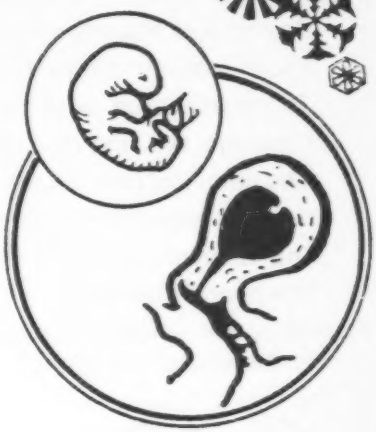
Revised Edition 1983

101.2:

1st Month

Conception to About Week 8
(after your last period)

Your Baby



Hereditary characteristics were set when the sperm met the egg (ovum).
The father's sperm determined your baby's sex.
The brain and the nervous system are forming.
The heart and lungs are forming, too.
Tiny spots for ears, eyes and nose are showing.
Arm and leg buds are forming.
The baby is growing inside a sac of amniotic [am-nee-ot-ic] fluid (bag of waters).
Your baby will be about ¼ to 1 inch long at the end of this month.

Your Body

You were two weeks pregnant when you missed your first period.
Your pregnancy test turned positive about 10 days later.
You were six weeks pregnant when you missed your second period.
The placenta [pluh-SEN-tuh] is forming and making hormones that prepare you for pregnancy.
You may feel nausea ("morning sickness") any time of the day.
You may feel tired.
Your breasts begin to feel tender.
Your uterus is growing larger, but you can't feel it.
You haven't gained weight or changed body size this month.

Your Responsibility

Make an appointment to start prenatal care.
Check with your doctor or clinic before taking any medicine.
Avoid X-rays while you are pregnant.
Avoid cigarettes and alcoholic drinks.
Limit drinks that have caffeine (colas, teas, coffee).
Eat a balanced diet.
You need whole grain breads and cereals, fruits and vegetables.
You need meat, fish and milk.
Talk with your partner about feelings you both have for this pregnancy.
Decide how you will tell your family, friends and employer about your pregnancy.

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2nd Month

Weeks 8 to 12
(after your last period)

Your Baby

This is a key month in your baby's growth.

- Seeing and hearing structures are in a critical time of growth.
- Facial features are forming.
- The head is large, since the brain grows faster than the other organs.
- Cartilage, skin and muscles are starting to shape your baby's body.
- The umbilical [um-BIL-uh-kul] cord has formed.
- Fingers, toes and fingernails are forming.
- The stomach, liver and kidneys are developing.
- The heart is beating.

Your baby will weigh about ½ to 1 ounce and be about 2¼ inches long by the end of the month.

Your Body

You may gain a pound or two during the month.

- Your waist size is likely to increase.
- Your breast size increases, and the nipples begin to darken.

The uterus may feel like a small lump above your pubic bone.

- It is softer, rounder and larger now.
- As it crowds the bladder, you may urinate more often.

The placenta is growing.

- More hormones are being produced.
- The tissues around the vagina become bluish as an increased blood supply nourishes the baby.
- The vaginal flow becomes thicker, whiter and stickier.

You may be more tired and have less energy this month.

Nausea (morning sickness) may still occur and it may be more noticed in the morning.

Your Responsibility

Begin regular prenatal checkups this month.

- Ask for prenatal test results: blood type and Rh factor, anemia, blood pressure, urine, weight.
- Ask about any drugs you are taking.
- Get prescribed vitamins and iron.

Eat a good diet including whole grains, proteins, fruits and vegetables.

- Take your prescribed vitamins.
- Drink 6-8 glasses of water each day.

Avoid cigarettes, alcohol, caffeine, junk foods, and/or medications unless prescribed by your doctor.

Avoid paints (except latex), pesticides and aerosol sprays.

Exercise: Walk, swim or bike 15 minutes daily.

Try to enroll in an "Early Bird" prenatal class.

Discuss feelings, ideas or worries with your partner that you may have about the effects of pregnancy.

Ask good friends or family about their experiences in the first few months of pregnancy.

Find out if you have insurance for maternity and baby benefits.

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3rd Month

Weeks 12 to 16

Your Baby

The baby is still too tiny for you to feel movement.

The ears, arms, hands, fingers, legs, feet and toes will be formed this month.

Your baby's vocal cords are formed.

The taste buds are forming.

The neck is well shaped.

The head can be held up.

Reflex movements allow your baby's elbows to bend, legs to kick and fingers to form a fist.

The sex of the baby is easy to tell now, if you could see inside the uterus.

The heart beat is 120 to 160 beats per minute.

Blood is now going through the cord to the baby.

About one cup of amniotic [am-nee-OT-ik] fluid surrounds your baby.

The baby's kidneys now circulate the fluid swallowed by the baby back into the amniotic sac.

By the end of the month your baby will weigh about ¼ pound and be about 2¼ inches long.

Your Body

You will begin to feel better by the end of this month.

You will be sick to your stomach less.

You will have more energy.

You may have gained about two to three pounds.

You may begin to feel more hungry.

The placenta is now formed. Hormones are keeping your pregnancy healthy.

You may be able to feel your uterus above the pubic bone.

Your uterus may harden from contractions.

You may be constipated.

You may sweat more.

You may be happy or sad for no reason.

Your Responsibility

Get your prenatal checkup this month.

- Ask about the changes in your body that worry you.
- Ask about your tests.

Eat a balanced diet.

- Eat whole grains, proteins, fruits and vegetables.
- Drink 6-8 glasses of water a day.

Avoid smoking, alcohol and caffeine drinks.

- Take only medicines prescribed by your doctor.

Avoid using paints, pesticides and spray cans.

You need to exercise each day.

- Walk, swim or bike fifteen minutes daily.

Share your good and bad feelings about having the baby with friends and family.

Check your budget and begin to set aside some money for baby items.

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4th Month Weeks 16 to 20

Your Baby

Your baby starts a growth spurt in length and weight.

Hair begins to grow.

- Hair appears on its head.
- Downy hair called lanugo [luh-NOO-goh] covers its body.
- Eyebrows and eyelashes start to grow.

The skin starts to fill out with fat.

The kidneys make urine.

Your baby enjoys moving about in the amniotic sac.

- The amniotic fluid increases a lot this month.
- You may feel its movements this month.

This month marks the midpoint in pregnancy.

- The heartbeat will be heard.
- A special stethoscope called a fetoscope [FEE-toh-skohp] will be used.

You baby will be about 10 inches long and weigh about ¾ pound by the end of this month.

Your Body

Your pregnancy is beginning to show.

- You gain ¾ to 1 pound a week for 3 to 4 pounds this month.
- Your nipples, the area around them, and the line on your abdomen (linea negra [LIN-ee-uh NAY-gruh]) darken.
- Your placenta releases hormones that help to soften some of your joints and muscles to make labor and delivery easier.

You are less tired.

You may begin to find you enjoy being pregnant.

You may be hungry more often.

- You may feel cravings for some foods.

The chance of urinary tract infection may increase this month.

- Drink 6-8 glasses of fluid each day.

Your uterus will be just below your navel by the end of this month.

Your Responsibility

Get your prenatal checkup this month.

Eat a blanced diet with lots of fruits and vegetables.

- Take your prenatal vitamins and iron.
- Avoid caffeine drinks, alcohol, cigarettes and drugs.

Get daily exercise.

- Work up to walking at least 1 mile.
- Learn and practice the Kegel and pelvic rock exercises.

Lie down and get your feet up at least 30 minutes a day.

Choose comfortable clothes to fit your changing size.

Fit seat belts low over your hips.

Talk about what the baby will be like and about your new responsibilities with your partner.

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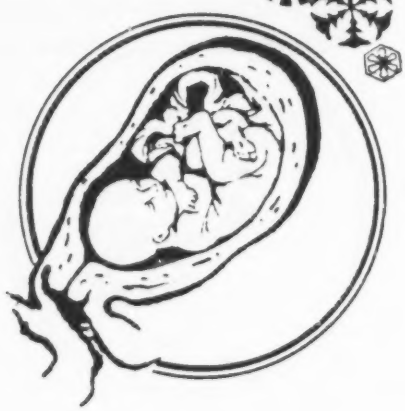
5th Month Weeks 20 to 24

Your Baby



Your baby will begin to move a lot.

You will feel its arms and legs move.

There will be active times and quiet times.

The skin is protected by a white cheesy secretion as the baby moves in the amniotic fluid.

The skin is wrinkled and red.

The skin is filling out with fat.

The eyelids are still closed.

The fingernails are growing.

The heartbeat is easy to hear with a special stethoscope

Your baby will be about 12 inches long and weigh about 1½ pounds by the end of this month.

Your Body

You feel good most of the time.

People tell you that you look good.

You have the "bloom of pregnancy."

You will gain about ¾ pound a week.

About 3 to 4 pounds a month.

Your breasts grow larger, softer and the veins start to show.

Colostrum [Kuh-LOSS-trum] may leak from your breasts.

You can feel the uterus at the navel or just above.

Constipation may be a problem until the end of your pregnancy.

Your hair may feel thicker and more oily.

Sometimes you may find it hard to cope. This can happen almost anytime during pregnancy.

Your Responsibility

Continue your prenatal checkups.

Eat a balanced diet.

- Include plenty of milk and milk products.
- Drink 6-8 glasses of water and other fluids every day.
- Avoid smoking, alcohol, drugs, caffeine drinks and junk food.

Buy well fitting support bras.

Find a class for expectant couples.

- Learn how to breathe and how to relax.
- It will help you during labor.

Walk and do Kegal and pelvic rock exercises every day.

Take time for a rest period every day.

- Lying on your left side may be more comfortable.

Discuss your concerns about parenting with your partner.

Share your good and bad feelings about having the baby with friends and family.

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6th Month Weeks 24 to 28

Your Baby

Your baby is big enough to be felt when your abdomen is examined.

The skin is still wrinkled and red.

The fingerprints are forming.

The eyes are almost developed.

The eyelids can open and close.

Your baby can kick, cry and hiccup.

Noises from the outside may cause the baby to move or become quiet.

Your baby will be about 15 inches long and weigh about 2½ pounds by the end of this month.

Your Body

You continue to gain about 3 to 4 pounds a month.

You may develop stretch marks on your stomach, hips and breasts.

The uterus may be felt above the navel.

Tightening and relaxing muscles in your uterus (Braxton-Hicks contractions) are preparing you for labor.

Your appetite is good.

Nausea is rare, though heartburn may follow heavy, greasy or spicy meals.

You look healthy.

Your skin has a special glow and your eyes sparkle.

You sex drive may increase or decrease and change from week to week.

You feel more involved with the baby growing inside you.

You may think about things that can go wrong with your baby.

Most women do at some time in pregnancy.

Your Responsibility

Get your prenatal checkup on schedule even if you feel great.

Eat a good diet with plenty of fruits, vegetables and whole grains.

Take needed rests lying on your left side.

Talk about childbirth experiences with other parents.

If they scare you, write down questions to ask your doctor or clinic.

Discuss feelings about your changing body.

Start collecting things for the baby's first weeks.

- Make a list for family and friends.
- Prepare for breast or bottle feeding.

Plan to get information on breast and nipple care. Then check on the supplies you will need.

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7th Month

Weeks 28 to 32

Your Baby

Your baby is 16 inches long.

- A fine, soft hair called lanugo [lu-NOO-goh] covers the baby.
- The brain and nervous system grow quickly.
- Your baby's heartbeat might be heard by another person placing an ear on your abdomen.
- Iron is being stored from now till birth.
- The fingerprints are formed.
- The testicles of boys start to move down into the scrotum.
- Sleeping and waking times are definite.
- Kicking and stretching movements are often noticed.
- Your baby is sucking its thumb.

Your baby will weigh about 2½ to 3 pounds by the end of this month.

Your Body

You may gain weight faster because this begins the baby's greatest growth period.

Your uterus is moving closer to your rib cage.

- You may notice kicking against your ribs.
- You can see your abdomen move as your baby moves.

You may feel awkward and tire more easily.

- You may notice some light-headedness when you get up.
- Your feet, hands and ankles may swell if it's hot or you've been standing a lot.

Your breasts may leak enough to require padding in your bra.

You may notice a loosening in the pelvic bones when you walk.

Your Responsibility

Get your prenatal checkup this month.

- Discuss how close to delivery you want to work.

Start prenatal classes right away if you have put it off.

- Tour the labor and delivery section of the hospital you will use.
- Think about things you will need the first 6 weeks, like convenience foods, paper plates, disposable diapers, and/or diaper service.

Eat a balanced diet with plenty of iron-rich foods like liver, eggs and meat.

- Drink 6-8 glasses of fluid each day.

8th Month Weeks 32 to 36

Your Baby

Your baby weighs about 5½ pounds and is about 18 inches long.

Your baby's eyes are open.

Its skin is smooth because fat begins to fill out the wrinkles.

The downy hair gradually disappears.

Your baby is active with noticeable patterns of sleep and wakefulness.

It may settle into the position for birth.

Its body is now mature enough to survive if it is born early.

Your baby gains about 2 pounds this month.

Your Body

You may find this month the most uncomfortable.

You may have trouble sitting or lying down for long periods of time.

You may have a problem breathing when the baby pushes against your lungs.

Your uterus is now near your rib cage.

You can feel parts of the baby through your abdominal wall.

You may need to urinate more often (as the baby's head crowds your bladder).

Your vaginal secretions increase.

You may have hemorrhoids [HEM-or-roidz].

You may have heartburn.

You may sweat more easily.

You may begin to tire easily.

Your Responsibility

Have a prenatal checkup every two weeks this month.

Ask for another blood test for anemia.

Eat a balanced diet of small frequent meals.

Drink 6-8 glasses of fluid each day.

Keep up your walking and stretching exercises.

Practice the exercises from your childbirth class.

Practice the relaxation techniques during Braxton-Hicks contractions.
(The normal tightening or releasing of the uterine muscles.)
Review what happens in labor and delivery.
Make financial arrangements with the hospital.
Make arrangements for the baby's care after birth.
Plan for someone to help you at home after the birth.
Discuss names for the baby with your partner.

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9th Month

Weeks 36 to 40

Your Baby

Your baby weighs 6½ to 7½ pounds and is about 20 inches long.

The eye color is dark grey.

This may change after birth.

The fingernails become complete and may grow long.

The baby settles into a head down position.

The baby may seem quieter.

There is less space to move.

There are still periods of sleep and activity.

Its systems and organs still grow so it will be ready to breathe and grow on its own after birth.

About one quart of amniotic fluid surrounds your baby.

Your baby grows about 2½ inches and gains 2 pounds.

Your Body

You are tired of being pregnant and ready for delivery.

Your abdomen is getting bigger.

It may look lopsided when the baby moves.

Your hands and feet may swell.

You may feel pressure low in the pelvis as the baby settles into position for birth.

The Braxton-Hick's contractions are more frequent.

Your sleep may be disturbed.

You may need to urinate more often.

You may need to move more often.

You tire easily and often feel drowsy.

Your Responsibility

Get a prenatal checkup each week until the baby arrives.

Eat a balanced diet

Eat smaller meals more often.

Continue to exercise and practice for childbirth.

You should limit out-of-area travel.

Plan for a birth control method.

Cover your mattress and your chair with plastic in case your bag of water breaks.

List phone numbers of people to call when labor begins.

You should pack your suitcase.

Put in clothes and other items to use at the hospital.

Put in clothes for you and your baby to wear home.

Treat yourself and your partner to something special.

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DAY ONE After Childbirth

Your Baby

Your newborn baby may look wrinkled and red.
Its head may be a bit out of shape from birth.
Its head will be large compared to its body.
The top of its head will have soft spots in front and back.
Your baby's eye color will be dark grey, but may change during the next few weeks.
Your baby can focus on your face.
Its breasts (both sexes) may be swollen for a few days.
A boy baby may have a swollen scrotum [SCROH-tum].
A girl baby may have a small bloody vaginal discharge.
It can respond to your voice and touch.
It can grasp your finger, suck its fingers and nurse.

Your Body

Share the joy of birth with your mate.
You may feel tired and elated.
You want to cuddle your new baby.
You will want to eat, sleep and bathe.
Your episiotomy [ee-PEEZ-ee-aw-toh-mee)] incision will be sore.
You may have trouble urinating because of swollen tissues.
You will lose weight as fluid is lost through frequent urination.
You may sweat a lot to get rid of extra fluid.
You will have a vaginal discharge (lochia) of blood from the uterus. It may be present for one to five weeks after birth.
You will not have milk for several days.
Colostrum [coh-LAW-strum] will nourish your baby.
Your abdomen will stay large until your muscles tighten.

Your Responsibility

Hold, cuddle, touch and enjoy your baby.
Talk with your partner about the birth experience.
Repeat Kegel [KAY-gul] exercises after birth.
Get up and walk as soon as you can.

Rest when you are tired.
Drink lots of liquids and eat when hungry.
To increase milk flow, breastfeed soon after delivery and at least every 2 to 3 hours.

NOTES:

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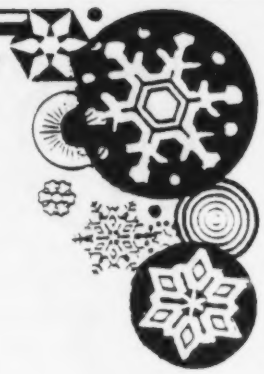

PRENATAL CARE EXAMINATION

You should go to the doctor as soon as you think you are pregnant.

You should have checkups often.

This is the best way to avoid serious problems.

You can care for your health and your baby's health this way.

Your new baby's future depends on you from now on!

HEALTH HISTORY

Your health team will want to know about your past health.

Your health team can give special care if some part of your health history could be a problem for you or your baby.

They will ask questions about other pregnancies.

They will want to know about miscarriages and abortions.

They will also want to know about menstrual periods and problems with your periods.

You will be asked about many other illnesses.

You will also be asked out other illnesses that have occured in the family.

BLOOD TESTS

Samples of your blood are taken for blood tests.

The tests help show some things about your health.

One test checks your blood type.

It tells if the blood is Rh postive or Rh negative.

The tests also show anemia or an infection such as syphilis [SIF-i-lis].

Syphilis could harm your baby.

Another test will show if you are protected against rubella [roo-BEL-uh] (German measles).

Some of these tests may be given again during your pregnancy.

BLOOD PRESSURE

Your blood pressure will be checked to learn what is normal for you.

It will be checked often to see if it remains normal.

Many women are more anxious and feel more stress during pregnancy.

You may not always be aware of stress but it is there.

Sometimes stress can cause blood pressure to be higher.

Higher blood pressure can sometimes be a sign of "toxemia" of pregnancy. Toxemia is a large buildup of body waters in the blood.

Poor diet may be the most leading cause of toxemia [tox-SEE-mee-uh].

All causes of toxemia are not known.

Toxemia can be stopped before it is serious.

This can be done when it is found early.

Lots of rest and a balanced diet help a great deal.

WEIGHT

You will be weighed at each visit.

Gaining or losing too much weight can affect your baby's health.

The pattern of your weight gain helps show if there is too much fat or too much fluid.

It is normal to store some extra fluid while you are pregnant.

Your baby will not get enough food if you gain too little weight.

You are about the right weight if you gain about 24 to 30 pounds.

URINE TESTS

A urine test will be done at each visit.

The urine is tested for sugar and protein content.

These tests will show if there is diabetes or some other problem.

A urine test will also show if there are kidney or bladder infections.

These infections can occur more often when you are pregnant.

BREAST EXAM

Your breasts will be examined in some visits.

You should also learn how to examine your own breasts.

You may want to nurse your baby.

You should ask for directions on how to get your breasts and nipples ready.

ABDOMINAL EXAM

The size of your uterus will be measured at each visit.

This shows the growth of your baby.

The baby's position and size will be checked.

You can hear the heartbeat just after the 4th month.

PELVIC EXAM

A pelvic or internal exam will be done at some visits.

The inside of the vagina will be checked.

The sizes of your birth canal and uterus are checked.

Your pelvic bone structure is checked.

PHYSICAL EXAM

You will have a complete physical exam when you are first pregnant.

You may have a complete physical again close to the end of being pregnant.

SPECIAL TESTS

There are some special tests which may be given.

These tests give important facts about your baby's growth and health.

One test that is given is the sonogram [SAWN-o-gram].

It is something like an X-ray but sound waves are used.

Sound waves are used because they are safe.

They show how the baby is located in your uterus.

They also show where the placenta is located.

Another test that is sometimes used is amniocentesis [am-nee-oh-sen-TEE-sis].

This test is only used when there are special problems.

Some of the amniotic fluid [am-nee-OT-ik FLOO—id] around the baby is taken out.

This fluid will tell the sex of the baby.

It will show if there are problems such as jaundice [JAWN-dis].

There is seldom pain or injury to you or your baby.

But there is some risk when the needle is put into the amniotic sac.

QUESTIONS AND ANSWERS

Sometimes your health advisor doesn't talk about everything you want to know.

Ask any questions you have about your pregnancy.

There is no such thing as a "dumb question."

It may help to write down your questions.

This way you won't forget them.

DETERMINING YOUR "DUE DATE"??

The average time from conception to full term is 266 days.

The pregnancy period is about 40 weeks.

Only 5 percent of babies arrive on their due date.

Most babies arrive about two weeks before or after their due date.

The due date is counted as 280 days from the first day of your last period.

DIRECTIONS:

1. Find the first day of your last period on the calendar.
2. Move ahead 9 more months.
3. Find the same date.
4. Add 7 days.
5. That will be your baby's due date.

EXAMPLE:

1. Suppose your last period began June 10.
2. Move ahead 9 more months to March.
3. Find March 10.
4. Add 7 days.
5. The due date would be March 17.

PREGNANCY CALENDAR

Counting ahead 9 months and adding 7 days:

FIRST DAY OF LAST PERIOD

JUNE

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	(10)	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

1 — 2 — 3 — 4 — 5

JULY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

AUGUST

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9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER

S	M	T	W	T	F	S
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6	7	8	9	10	11	12
13	14	15	16	17	18	19
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27	28	29	30			

OCTOBER

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18	19	20	21	22	23	24
25	26	27	28	29	30	31

NOVEMBER

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22	23	24	25	26	27	28
29	30					

6 — 7 — 8 — 9

DECEMBER

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27	28	29	30	31		

JANUARY

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18	19	20	21	22	23	24
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FEBRUARY

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

MARCH

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1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	(17)	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

ESTIMATED DUE DATE

Predicting the due date is just a good guess.

Your menstrual cycle will effect the length of your pregnancy.

The baby may be early if you have periods every 21 days.

Your baby may be later if your periods are usually more than 28 days.

Women with regular periods usually have their babies close to the due date.

Your age, race, size and number of children do not make a difference.

Sometimes doctors use other ways to set the due date.

They do this when the woman has used birth control pills; or, she has irregular periods; or she hasn't kept track of her periods.

They may do some of the following:

Listen to the baby's heart tones.

Check the size of the uterus

Check for the baby's movement. (Mark on your calendar the first time you feel the baby move. Report it at your next visit.)

Feel the fetus through the abdomen.

Measure the uterine contractions and the abdominal size.

The due date is harder to set near the end of pregnancy.

That is one reason why early prenatal care is important.

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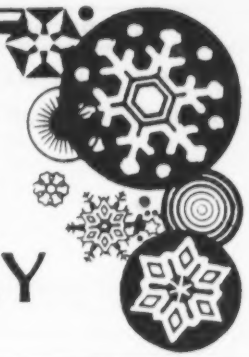


USUAL COMPLAINTS AND PROBLEMS OF PREGNANCY

SYMPTOMS	WHAT TO DO
1. NAUSEA	Eat dry crackers, toast or cereal before getting up or when feeling sick Eat 5-6 small meals a day. Drink lots of water between meals, but not during meals. Avoid strong food smells. Avoid greasy or spicy foods.
2. TENDER BREASTS	Wear a good bra. It may help to wear it to bed.
3. LEAKING BREASTS	Wear nursing pads or tissues in your bra.
4. FREQUENT URINATION	Limit fluids before bedtime. Limit fluids when a bathroom is not close. (Drink necessary fluids at other times.)
5. FATIGUE	Fatigue is common early and late in pregnancy. Try to exercise each day to keep you from getting so tired. Lie down at least once a day.
6. CONSTIPATION	Eat raw fruits, vegetables, prunes and whole grain or bran cereals. Exercise helps. Walking is very good. Never hold back a bowel movement. Drink at least two quarts of fluid each day. A cup of hot water three times a day helps.
7. HEMORRHOIDS	Try to keep bowel movements regular. Take short rests with hips lifted on a pillow. Sit on firm chairs or sit tailor style on the floor. Practice the Kegal Exercise.
8. LOW BACKACHE	Rest often. Keep good posture. Move around rather than standing in one place too long. Use a footstool for your feet. Keep your knees higher than your hips. Wear low heeled shoes. Use the Pelvic Rock Exercise.

SYMPTOMS	WHAT TO DO
9. VAGINAL DISCHARGE (Itching/discharge/odor)	Bathe the outer vaginal area often. Use soap without perfume. Do not use vaginal sprays, powders or feminine hygiene products. Do not use colored or perfumed toilet paper. Wear cotton panties. Avoid panty hose, girdles and tight pants. If these hints do not help ask your health care advisor about problems.
10. HEARTBURN	Stay away from greasy and spicy food. Eat smaller meals but eat more often. Don't lie down just after eating.
11. DIZZINESS	Change your position slowly. Get up slowly when you have been lying down. Eat regular meals. Do not stay in the sun too long. Report ANY dizziness to your health care advisor.
12. VARICOSE VEINS	Avoid stockings or girdles with elastic bands. You may use support hose. Put them on while lying down. Take short rests with legs raised. Raise your legs when you sit down.
13. SHOOTING PAINS DOWN LEGS	Change positions: If you are sitting - stand up, If you are standing - sit down.
14. LOWER LEG CRAMPS	Elevate legs often during the day. Point toes upward and press down on kneecap. Use a heating pad or hot water bottle for relief. Avoid meals at bedtime.
15. INCREASED SECRETIONS (Mucous - nose/throat/ mouth)	Take care of these problems as best you can. Do not use over-the-counter medicine. Check with your health care advisor.
16. TROUBLE SLEEPING	Do not eat just before sleep. Drinking milk may help. Try a warm bath before you go to bed. Practice exercises which help you relax.
17. FEEL FAINT WHEN LYING ON BACK	Lie on your left side.

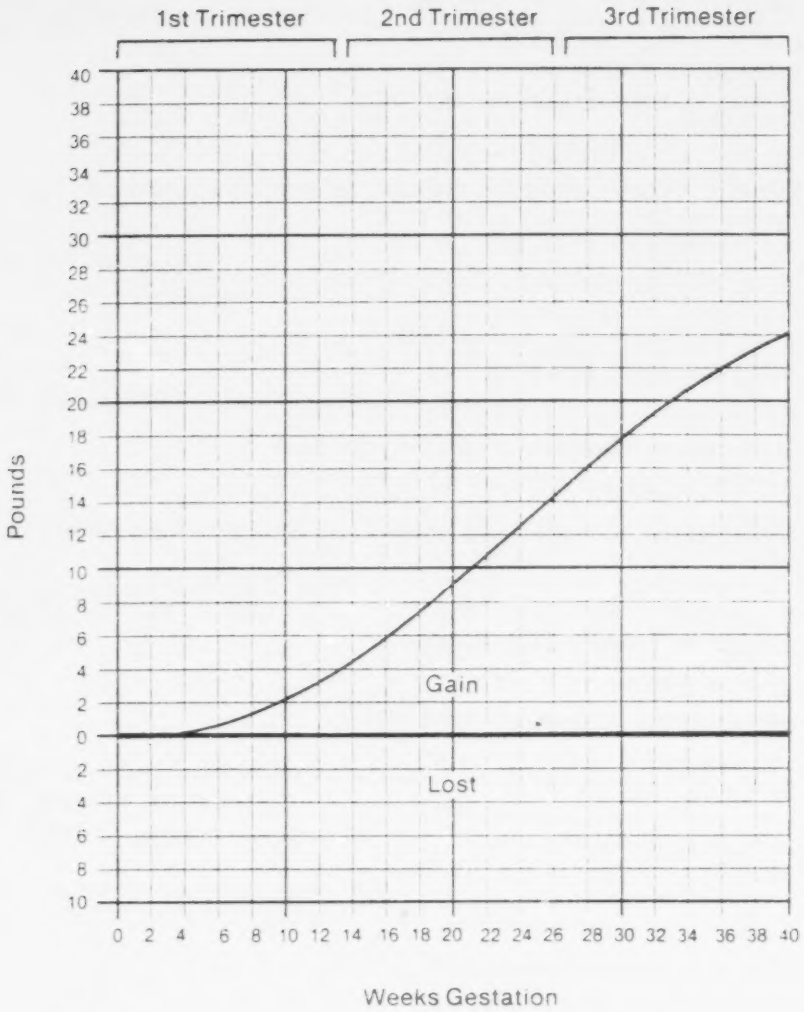
SYMPTOMS	WHAT TO DO
18. FEET AND HANDS SWELL	Lie on your left side for thirty minutes. Do this three or four times a day. Exercise often. Drink more fluid. Eat three servings of protein each day. If you wake up in the morning with swelling, tell your health care advisor.
19. BLEEDING GUMS	Use a soft toothbrush and brush gently. Drink more orange juice and eat more foods high in Vitamin C.
20. FALSE LABOR	Change your position and your activity. If it is true labor it will not stop. True labor contractions will become more regular and closer together. You will feel true contractions more in your back.

Tell your doctor or clinic what problems/complaints you have been having and what you have done to provide relief.

If at any time these methods don't work, CALL your health care advisor.

Adapted with permission from Maricopa County Health Department, Mesa Primary Care Center.

The following chart is one which shows the average weight gain during pregnancy. You can chart your own weight gain here and see how you compare.



AVERAGE WEIGHT GAIN

1½	lbs	Placenta
2	lbs.	Uterus
1	lb.	Breast tissue increase
8½	lbs.	Increased blood and fluids
7½	lbs	Baby
4	lbs.	Maternal stores
24 +	lbs.	TOTAL WEIGHT GAIN

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CAFFEINE ALTERNATIVES

Doctors don't know all the effects of caffeine on the unborn baby.

Some think caffeine stimulates the baby's nervous system more than the mother's.

Caffeine may affect the growing parts and tissues of the fetus.

Caffeine is a stimulant found in coffee and some soft drinks (such as Tab, Dr. Pepper, Mountain Dew, Coca Cola, Pepsi and Royal Crown).

It is also found in tea and chocolate.

Some pain relievers contain caffeine (APC, Empirin, Anacin, Excedrin, Vanquish).

Be careful:

Don't drink more than three cups a day of any drink with caffeine. Use ONLY medicine prescribed by your doctor.

INSTEAD OF CAFFEINE DRINKS, TRY:

Caffeine-free and sugar-free soda pop

Decaffeinated or grain coffees.

Flavored teas with "no caffeine."

Real fruit juice.

Bouillon or broth.

Milk.

Ice water.

Soda water with a twist of lime or lemon.

Favorite drinks at a new temperature (such as hot lemonade).

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JUNK FOOD ALTERNATIVES

Junk food has little or no food value per calorie.

They are often too high in sugar, fat, salt or artificial ingredients.

You and your baby need many nutrients to be healthy. Empty calories cause fat instead of lean tissue.

AVOID THESE FOODS:

(no more than two servings a week)

Fast foods: hamburgers, fried chicken, pizza, french fries, tacos.

Snack chips.

Candy, ice cream, soda pop, pastries and rich desserts.

Recipes calling for fats, white flour and sugar.

CHOOSE THESE FOODS:

Fruit snacks

Try dried apples, dates, raisins, prunes, pineapple, apricots and peaches.

Eat frozen, unsweetened Bing cherries, strawberries, peaches and melon balls while icy.

Try fruit "canned in its own juice."

Try ice-cold fresh fruit or juice.

Desserts

Make cookies with whole wheat flour, applesauce, raisins, nuts or oatmeal.

Reduce sugar and fat in favorite recipes. Use 2 tablespoons less than the recipe calls for.

Try rice or bread puddings, or low fat ice milk, custard, pudding, flavored yogurts.

NUTRITIOUS NIBBLES:

Whole grain crackers.

Unbuttered popcorn.

Dry cereals, such as shredded wheat biscuits.

Unsalted pretzels.

Raw carrots, celery, radishes, zucchini, mushrooms, peppers and cherry tomatoes.

Nuts or seeds in the shell (to keep you from eating too many, too fast).

Dips or spreads made with yogurt, cottage cheese and peanut butter.

TRY THESE RECIPES:

Peanut Butter Balls

Mix 1 cup peanut butter, ¾ cup honey, and 1½ cups powdered dry milk. Add raisins or sunflower seeds, if desired. Roll into balls.

Yogurt Popsicles

Freeze ¾ cup of low fat yogurt mixed with 2 tablespoons of frozen juice concentrate.

READ PACKAGE LABELS:

The ingredients are listed by weight. The first ingredient weighs the most and is the greatest amount in the food.

Be sure that sugar, corn syrup or any word ending in -ose (a form of sugar) is not one of the first four ingredients.

ALCOHOL AND DRINKING ALTERNATIVES

The best advice is: DO NOT drink any beer, wine or liquor while you are pregnant.

When you drink, your unborn baby drinks, too.

Doctors worry that an unborn baby may be hurt by the alcohol.

Instead of drinking alcohol:

- Tell people you don't drink because you are growing one of the world's best babies.
- You could order a drink without alcohol.
- You could ask for soda water with lime or lemon.
- Order fruit juice.

If you decide to drink alcohol:

- Limit your drinking.
- To be safe, drink no more than two light drinks per month.
- Never drink more than one ounce of alcohol at any time.
- One ounce of alcohol equals about:
  - Two 5-ounce glasses of wine, or two 12-ounce cans of beer, or two mixed drinks.
- Avoid drinking on an empty stomach.
  - The alcohol is absorbed faster then.
- Sip your drink and make it last at least one hour.
- You can drink mineral water, soda pop, or fruit juice between drinks.
- Mix your drinks with more mixer.
- Avoid binge drinking.
- One time of heavy drinking may be harmful.
- Your baby gets drunk on less than you do and it takes longer to get over it.

Don't use drugs in place of alcohol. Take only prescribed medicine.

If you are having trouble limiting how much you drink, when you drink, or where you drink, ASK FOR HELP!

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BREAST OR BOTTLE FEEDING

Before deciding to breast feed or bottle feed your baby, consider the following:

BREAST FEEDING

A healthy mother with a good diet produces enough milk for the baby.

Breast milk contains all the nutrients needed by the baby in the first four months of life.

Breast milk is easier for the baby to digest.

Studies have shown that breast fed babies have fewer serious illnesses.

Breast milk helps prevent diarrhea and other intestinal disorders.

Breast milk may prevent allergies and infections.

Breast fed babies grow slower after the fourth month of age. Studies suggest that slow, steady growth may be better for the health of the child.

Breast feeding can help the mother return to her normal weight. Energy is used from stored fat to produce the milk.

Breast feeding helps the uterus return to its normal size.

Breast feeding makes the child and mother feel closer.

Breast milk requires no preparation.

A good diet keeps mother's body healthy and helps to make enough breast milk.

BOTTLE FEEDING

Bottle feeding is easier when mother goes out.

Anyone can feed the baby.

Mothers who bottle feed can take some medications.

Formula is sold in most food and drug stores.

Formula is in ready-to-feed cans or bottles.

YOU ARE THE ONE TO DECIDE WHETHER TO BREAST FEED OR BOTTLE FEED.

Adapted from and permission to reprint granted by the Dairy Council of Arizona

BREAST FEEDING YOUR BABY

GOOD FOR MOTHER AND BABY

Breast feeding is safe, simple and the natural way to feed your baby.

Most breast fed babies have less upset stomachs, colic and diarrhea.

And, they have fewer allergic reactions.

Mother's milk is clean and the right temperature.

It's easier for the baby to digest.

Colostrum is the yellowish, first "milk" in your breast.

It comes in for two or three days before the regular milk.

It protects your baby from many infections.

CARE OF BREASTS

Wash your nipples with plain water once a day.

Do not wash them with soap or put rubbing alcohol on them.

That removes the natural oils that protect them.

The oils are made by glands around the nipple.

Don't worry if your nipples get sore.

It won't last.

Nurse your baby more often for shorter time periods.

Change the position you nurse the baby in.

Put cooking oil on your nipples after each feeding.

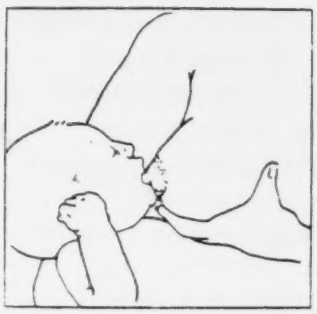
Wear a good support bra for comfort and to keep your breasts from stretching.

Take out any plastic lining from your bra so your nipples will get enough air.

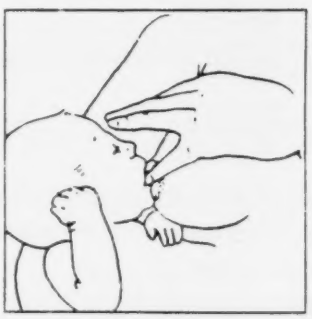
Between feedings, put a clean cloth in your bra to absorb leaks.

Press your hand against your nipple to stop the "tingling."

The leaking is only for a short time.



To start nursing, touch baby's cheek with your nipple. He will turn his head to reach the nipple. Allow him to grasp as much as possible of the dark colored part of the breast in his mouth, not just the nipple.



At the end of nursing time insert your finger in the corner of baby's mouth to break suction. Never pull the nipple from the baby's mouth.

It usually stops when your milk supply becomes established.

Wear a bra to bed to reduce the leaking.

Put a warm cloth on your breasts if they become swollen and heavy.

This will start the milk flowing.

Gently release milk by hand or breast pump to reduce the fullness.

Also, shorter and more frequent feedings will help reduce the fullness.

And, it will be easier on your nipples.

HOW TO BREAST FEED

Wash your hands with soap and water before nursing.

Find a relaxed position for you and your baby.

Lie down or sit in a chair that supports your arms.

Keep your baby's head higher than its stomach.

Then it can swallow easily.

Nurse your baby when it is hungry.

Babies don't have a pattern for when to be fed at first.

Sometimes they want to eat every two to three hours.

This doesn't last long.

They soon have a schedule and the feedings are spaced farther apart.

Nurse your baby at one breast until it is empty.

That will take 10 to 15 minutes.

Then move the baby to the other breast.

Nurse as long as the baby is hungry.

Start each feeding with the side you stopped at the last feeding.

This keeps both breasts making the same amount of milk.

Some mothers move a safety pin back and forth on their bra.

This helps them remember.

Burp the baby when you switch from one breast to the other.

To burp, put the baby's face on your shoulder and gently pat its back.

Burp the baby again when it is done nursing.

Don't worry if there is no burp after a couple of gentle pats.

The baby doesn't have any air to burp.

Many breast fed babies don't need to be burped.

Put the baby in bed on its stomach after feeding.

Never put the baby on its back after feeding.

HELPFUL HINTS

The baby is usually getting enough milk when it gains weight and there are six or more wet diapers a day.

Your baby's appetite may increase after the first few weeks.

It will let you know if it wants to nurse more.

You will have more milk when the baby nurses more.

If you don't think you have enough milk, try:

Nurse more often for a few days (try every two hours for a few days)

Don't skip night feedings if the baby wakes up.

Drink plenty of liquids.

Relax as much as possible.

It's better to nurse more often than to give formula from a bottle.

A breast fed baby's sucking strength is weakened when bottle fed.

Wait until the baby is nursing well before substituting bottles of breast milk or formula.

This takes about four weeks.

Most nursing babies don't need water except when it's hot.

Offer the baby cool, plain water during very hot weather.

The water should be boiled and in a clean bottle.

The baby doesn't need other food until four to six months of age.

There are different ideas about when to start solid foods.

Discuss this with your health advisor.

A yellowish liquid bowel movement is normal for a nursing baby.

Many babies have a bowel movement after each feeding in the first weeks. This is normal, it is not diarrhea.

Sit down or lie down before you nurse when you feel anxious or worried.

Take a couple of slow deep breaths and relax.

Drink a cool glass of milk, juice or water.

The first weeks of nursing can be a little hard.

You are adjusting to a new baby, too.

Don't let yourself get "down."

After the short learning time, nursing is easy.

Take advantage of your baby's nap time and rest yourself.

Light exercise such as walking will help, too.

The slight cramps you feel when you start nursing are normal.

It's nature's way of helping your uterus return to normal size and position.

This will stop in two to three weeks.

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You can nurse your baby without showing your breast.

Wear a two-piece outfit that lifts up or blouses which button in the front.

Any amount of breast feeding is good for your baby.

You can nurse for as many months as is comfortable for both of you.

Wean the baby from the breast slowly.

It should be done over several weeks.

There are ways to prevent your breasts from swelling.

When they swell, they feel hard and tender.

Ask your health advisor for instructions.

MEDICATIONS

Some medicines get in the breast milk.

They may upset the baby.

Check with your doctor or clinic before taking medicines or laxatives.

Do not take birth control pills as they can reduce the amount and quality of your milk.

You can get pregnant while nursing.

Birth control pills can reduce the amount and quality of your milk.

Don't take them while nursing.

Use another form of birth control.

FOOD FOR THE NURSING MOTHER

What you eat makes a big difference in how you feel.

It is very important when you are nursing.

Your food needs are greater while nursing than when pregnant.

The right food will help you have enough milk.

The nursing mother can eat anything that agrees with her.

But the baby may react to some foods.

Don't eat a food that often upsets the baby.

Eat a variety of foods daily to have enough milk.

Here is a basic daily food plan:

Protein Foods: 3-4 servings (meat, fish, chicken, eggs, dried beans, peanut butter)

Milk Products: 4-5 servings (milk, buttermilk, yogurt, hard cheese, cottage cheese).

Fruits and Vegetables: 4-5 servings (orange, grapefruit or tomato juice; yellow and dark green vegetables)

Breads and Cereals: 4-5 servings (bread, cereal, tortillas, rice, noodles, spaghetti)

Liquids: 8-12 glasses

The nursing mother makes about one quart of milk each day.

You need extra liquid to do this.

Drink a glass of milk, water or juice just before nursing.

Orange, apple and tomato juices, and lemonade are good choices.

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EXERCISES FOR PREGNANCY AND CHILDBIRTH

KEGAL [KAY-gul] EXERCISE

(The most important of all!)

PURPOSE:

This will strengthen the muscles around the vagina. It will increase your ability to control and relax these muscles completely.

HOW TO DO THE KEGAL EXERCISE:

1. To get the feel of the muscles, stop and start your urine when you use the toilet.
2. Try to tighten the muscles a small amount at a time, "Like an elevator going up to the tenth floor." Then release very slowly one "floor" at a time.
3. Try to tighten the muscles from front to back. Include the anus *(rectum)* as you did in number 2.

WHEN TO PRACTICE:

1. Practice while you sit, stand, walk, drive or watch TV.
2. Do these exercises three times each day . . . morning, afternoon and evening.
3. Start with five times each session. Work up to 20 to 30 each time.

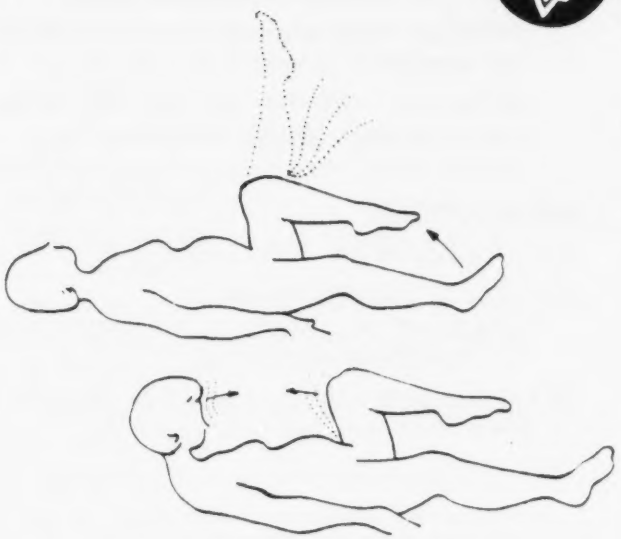
KNEE PRESS

PURPOSE:

This will strengthen your inner thighs. It will stretch your lower back. It will improve your circulation.

HOW TO DO THE KNEE PRESS:

1. Sit on the floor.
2. Now pull your feet together with soles touching.
3. Bring your feet as near to your body as you can with comfort.
4. Keep your back straight.
5. Press your knees slowly and gently to the floor.



6. Hold your knees to the floor and count to three.

WHEN TO PRACTICE:

As often as possible during the day sit on the floor cross-legged with your back rounded and relaxed.

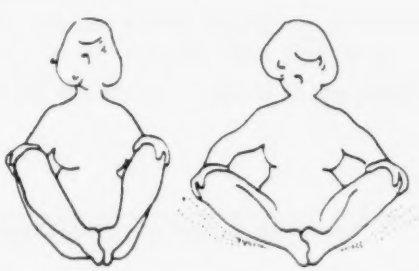
You could do this during TV commercials or as a break.

Work up to doing it ten times each day.

ABDOMINAL STRENGTHENERS

PURPOSE:

This will strengthen and stretch your abdominal *(tummy)* muscles. It will improve your circulation.



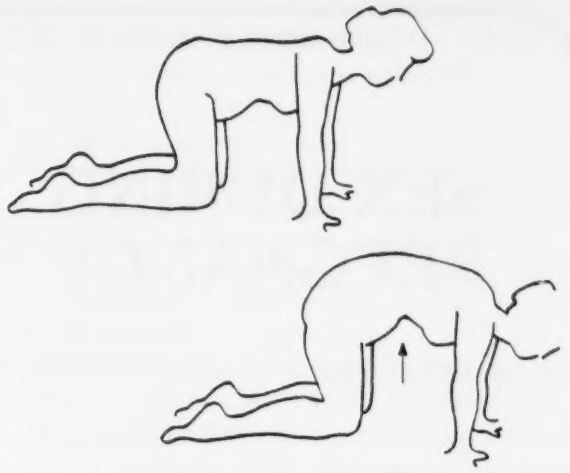
HOW TO DO THESE EXERCISES:

LEG RAISE

1. Lie on your back with feet flat on the floor. Press the small of your back into the floor.
2. Bring one knee up to your chest as close as you can.
3. Raise your leg in the air.
4. Bend your knee and return your foot to the floor.
5. Do the same exercise with your other leg.

KNEE REACH

1. Lie on your back with feet flat on the floor.
2. Lift your head and at the same time move one knee towards your nose. Get as close to your nose as you can.
3. Do the same thing with your other leg.



WHEN TO PRACTICE:

Repeat both of these exercises 10 times each day.

THE PELVIC ROCK

PURPOSE:

This will strengthen your abdominal muscles. It will relieve backaches. It will improve your circulation.

HOW TO DO THE PELVIC ROCK:

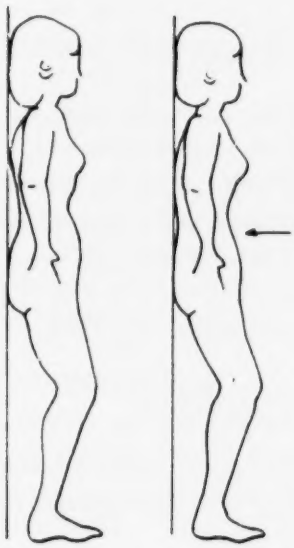
There are three ways to do this exercise. You are in a new position for each one. Each time you do this you will tighten your abdominal muscles. You tuck your buttocks under so that the small of your back is pushed back as far as possible.

POSITION 1

1. Get on your hands and knees with your arms straight.
2. Tighten your tummy muscles and tuck your hips under. Your back will hunch a little.
3. Relax.
4. Do this slowly and evenly.

POSITION 2

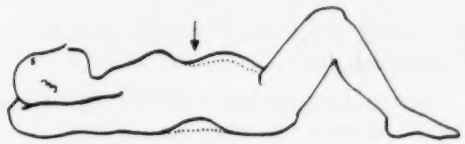
1. Start with your back against a wall.
2. Tighten your tummy muscles and tuck in your buttocks so the small of your back is flat against the wall.



3. If you put your hands on your hip bones, you should feel your hips rock.

POSITION 3

1. Lie on your back with your feet flat on the floor.
2. Tighten your lower tummy muscles and your buttocks to press the small of your back onto the floor.
3. Relax.
4. Repeat slowly and evenly.



Do each of these positions ten times each day.

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SEX DURING PREGNANCY

Sex is the start of pregnancy—pregnancy should not mean the end of sex!

Do not be afraid to have sex during pregnancy.

Intercourse can be enjoyed throughout pregnancy, unless your doctor advises against it.

This can be a very special experience for you and your partner.

Making love includes all the ways you can share pleasure and feel close to your partner.

This may be with or without intercourse.

Expectant couples often have questions about sex.

It is important to share your feelings with your partner.

Talking with each other is the key to a good sexual relationship.

Ask your health care team about your questions, too.

Some answers to some of your questions follow.

Since each pregnancy is unique there is no one answer.

WILL SEX CAUSE HARM TO THE BABY?

A big fear is that intercourse will harm your unborn child.

Nature does a good job protecting the baby.

It is almost impossible to harm the baby.

The baby is protected by the membrane (bag of water), and the fluid.

It is also protected by the stomach wall and the bony pelvis.

CAN YOU HAVE INTERCOURSE ANYTIME?

Sex during pregnancy is safe except in a few cases.

Some doctors feel that during the last few weeks sex may cause the membranes that protect the baby to break.

Many doctors do not agree with this.

It is best to follow your doctor's advice.

WARNINGS ABOUT SEX DURING PREGNANCY

1. If any of these things happen, stop intercourse and seek medical advice:

   pain in the vagina or stomach.

   bleeding, itching or discharge from the vagina.

   "bags of waters" bursts and fluid comes out of the vagina.

   you have been worried or think miscarriage might occur.

2. Never blow air into the vagina.

   The tissues in the uterus are filled with blood.

   Air blown with a hard force into the vagina can enter the blood stream.

   This can form an air bubble. This could harm both the mother and baby.

3. Take care that bacteria does not enter the vagina

   After anal intercourse the penis should be cleaned before it enters the vagina.

   Bacteria from the rectum can be passed to the vagina.

   The bacteria can grow and cause infection.

   This warning applies whether you are pregnant or not.

4. The man should not place his entire weight on the woman

   This puts pressure on the uterus.

   It can be uncomfortable as the baby grows larger.

5. If you have a history of miscarriage, should you have intercourse?

   It is best not to have intercourse for the first three months of your pregnancy.

   This gives the placenta plenty of time to develop.

   Remember, intercourse is not the only means of sexual pleasure.

WILL DESIRE FOR SEX DECREASE DURING PREGNANCY?

Your desire for sex may increase or decrease.

- Your feelings can vary a great deal.
- Some of these feelings come from the changes of pregnancy.
- This is normal!

Both partners need to adjust to these changes.

- You should not take these changes personally.
- The woman can feel the changes going on inside and outside. The man can only guess how the woman feels.
- Expectant fathers also have a right to shifts in their emotions.
- Sex and motherhood do not seem to go together for some men.
- Expectant fathers may feel guilty about their sexual desires and actions.

A woman may not feel very sexy toward the end of pregnancy.

- All her energy is directed toward getting ready for the baby.

Your desire for sex may increase.

- This is because you do not have to worry about birth control.
- An increase in blood flow to the pelvis causes sexual feelings.
- Many pregnant women feel the need for more affection.
- They need to feel they are still loved and look nice.

Talk about your feelings with your partner.

- Share your feelings and concerns.
- This will help you meet each other's needs.

IS IT HARMFUL TO HAVE ORGASM DURING PREGNANCY?

No, it is not harmful to have orgasm.

- Orgasm is just as safe during pregnancy as it is at any other time.
- Your having an orgasm will not hurt the baby.
- Some women late in pregnancy have sexual tension and pelvic discomfort after intercourse.
- Orgasm sometimes fails to relieve this tension.
- You may find it takes longer for your body to relax.

WHAT CAN I DO IF THE PRESSURE DURING INTERCOURSE IS UNCOMFORTABLE?

If it is your partners' weight, try changing positions.

- As the fetus grows try new ways to be comfortable during intercourse.
- One position that will carry you through most of the pregnancy and avoids belly to belly contact is the side-by-side position. The man is behind you so that you fit like a "spoon."
  - This position can be used even when the woman is in the later stages of pregnancy.
- Late in pregnancy you may want to try other postions where penetration is not as deep.
- The woman-on-top position is good for many couples.
  - The woman can control the depth of penetration in this way.

Sex is more than just having intercourse.

- Relax, explore and allow yourself to enjoy these special nine months.
- You and your partner can grow closer together.

POSTPARTUM SEX

HOW SOON AFTER DELIVERY CAN INTERCOURSE START AGAIN?

Your body has many changes to go through after birth.

- All of these changes can affect your sex life.
- Your hormones must go back to normal levels.
- Your uterus and vagina have to return to their normal size.

YOU MAY BEGIN SEXUAL INTERCOURSE:

- Once the bleeding and discharge has stopped.
  - Any vaginal tear or incision should be healed.
    - This will take from two to six weeks.
    - It will depend on how fast your body heals.

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You should have a good method of birth control.

You need birth control because you can get pregnant the first few weeks after giving birth.

Vaginal foam for you and/or a condom for your partner is a good method.

This method is good until you have your checkup.

The checkup will be four to six weeks after you give birth.

It is important to talk about sex after childbirth.

Go slow and talk with each other about what feels good.

Your tissues may still be tender.

They will not be as moist as they were before.

A water soluble jelly, like K-Y, may help.

If you had stitches you may need to gently stretch that area.

Do not worry if intercourse is a little painful.

Your body needs time to adjust.

Be patient.

Take some time.

You can enjoy sex after childbirth.

You may have some other doubts or questions about when to begin intercourse.

Check with your health care team.

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CESAREAN BIRTH

WHY DO YOU NEED TO KNOW ABOUT CESAREAN [si-ZAIR-ee-un] BIRTH?

Every woman should know about Cesarean birth.

A woman may have a Cesarean when there is a problem in labor.

The doctor usually does not decide until about two hours before delivery.

Ask questions during your prenatal visits.

What questions should I ask?

Ask your health advisor for the choices you have in a cesarean birth.

Knowing ahead of time can help you know what to expect. .

Discuss the methods your doctor and the hospital use.

Then you will be ready, should you have a cesarean.

WHAT IS A CESAREAN BIRTH?

A cesarean delivery is when a cut is made in the abdomen (tummy) and the uterus. Then the baby is delivered through it. The mother has been given an anesthetic to keep from feeling pain.

Sometimes there is a risk in having a vaginal birth, so a cesarean birth would be safer.

It protects the baby and the mother.

About one of every seven births is cesarean.

A Cesarean is also called a "C-Section."

It is not a sign of failure if you do not have a vaginal birth.

You can still use what you learned in your childbirth class.

WHY HAVE A CESAREAN BIRTH?

The usual reason for a C-Section is having a prior Cesarean birth.

That is why you often hear, "once a cesarean, always a cesarean."

There is scar tissue in the uterus from the first cesarean.

The scar tissue is weak.

The muscles of the uterus work very hard during labor.

They contract and relax for many hours.

The baby and mother may be in danger if the scar tissue tears.

Many doctors do not want that risk.

Most reasons for the first cesarean are:

the baby's head is too large for the mother's pelvis.

the baby's heartbeat shows it is not getting enough oxygen.

the baby's heartbeat may show other problems.

the baby is in an awkward position (the butto or arms are coming first).

there is more than one baby.

the placenta is blocking the cervix (the uterus opening).

the placenta comes loose from the uterus before the baby is born.

the baby is more than two weeks past due and seems to have problems.

the "bag of waters" breaks and labor does not start.

the mother has herpes.

the mother has diabetes.

the mother has toxemia [tox-SEE-mee-uh] (a large buildup of body wastes in the blood).

the mother has severe vaginal bleeding lat in pregnancy.

WHAT HAPPENS IN A CESAREAN BIRTH

A C-Section delivery takes 45 to 90 minutes.

It takes 5 to 10 minutes to delivery the bal

Here is what usually happens:

Your abdomen (tummy) is washed and shaved.

Your blood is taken and typed. It is cross-matched before surgery.

A tube is put in your bladder to drain urine into a bag. Your doctor can then keep the bladder away from the cut.

An intravenous (IV) solution is inserted in your arm. This gives you nourishment or medication.

You may get an antacid to calm your stomach.

Your tummy is scrubbed again.

Something is applied to get rid of germs.

You will be given an anesthetic.

There are two kinds of anesthetics.

A **general** anesthetic [an-is-THET-ic] puts you to sleep.

A **local** anesthetic numbs some areas but you are awake.

Your doctor will decide which anesthetic to give.

The cut is made and the baby is delivered.

Your uterus and tummy are sewn.

This step takes most of the time.

WHAT ARE THE THREE TYPES OF C-SECTIONS?

The CLASSICAL [CLAS-see-cul] cut is a vertical (up and down) cut.

It is made on the front side of the uterus.

This is the quickest method.

The TRANSVERSE [trans-VURCE] cut is a horizontal cut.

It is made across the bottom of the uterus.

It is also called the bikini cut.

You may be able to have a vaginal birth later with this cut.

The LOW-FLAP cut is a small vertical cut.

It is made in the lower part of the uterus.

It can be enlarged if needed.

WHAT HAPPENS AFTERWARDS?

Ask to hold your baby for awhile and breast feed.

You should be able to do this if you are awake and the baby is alright.

Cesarean mothers can nurse their babies right away.

Breast feeding is more successful if the baby sucks soon after birth.

"Getting started" might be a bit slower.

The father should be allowed to hold and cuddle the baby, too.

This is a good time for parents and baby to get close to each other.

You will be taken to the recovery room after delivery.

You will stay there until the anesthetic wears off.

This may take two to five hours.

Some hospitals allow the father and the baby to stay with you.

Your baby may be taken to the special care nursery to be watched.

This is a common practice for Cesarean babies in many hospitals.

You will be moved to an area for new mothers after recovery.

Ask for another Cesarean mother if your have a roommate.

You can better understand and help each other.

You may feel less social than the other mothers.

You are in the hospital four to seven days for a Cesarean birth.

The stitches are removed about the fifth day.

Sometimes stitches that dissolve by themselves are used.

Feeling good again depends on your health at the time of the delivery.

The reason for the C-section makes a difference too.

HOW DO YOU GET BACK TO NORMAL?

You can prevent problems if you exercise while still in bed.

The exercises reduce gas pains and speed recovery.

They take some effort, but are worth it.

Ask your health care advisor about them.

Rest is very important for your recovery.

You will need help to care for your baby.

You should have someone close come live with you.

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They should plan to be with you for two to three weeks.

You should not be alone until the baby is seven days old.

Most of the time you will be in bed for those seven days.

You will be able to get up to care for the baby and go to the bathroom.

In the second and third weeks you should be up daily.

But, you should rest often.

Do not lift anything heavier than your baby.

When you start feeling better, you should still take it easy.

You will delay feeling good again if you do too much, too soon.

The scar tissue will fade but it will not go away.

The same place is used if you have another C-section.

The old scar tissue is removed.

A Cesarean is just one of two ways to have a baby.

You need longer to recover, but you and your baby are healthy.

Hold and touch your baby as soon as you can.

You, the father and the baby can enjoy your new lives together, right away!

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FACTS FOR FATHERS

You are about to go through one of life's greatest joys—the birth of your child.

This is a time of change for both you and your partner.

Here are some ideas to help you.

YOUR PARTNER'S PREGNANCY

The pregnancy will have more meaning for the both of you if you keep involved during the entire pregnancy.

YOUR PARTNER SHOULD GET GOOD PRENATAL CARE.

She should see a doctor on a regular basis.

Visits to the doctor can help make sure the pregnancy is going as it should.

Stay informed about her pregnancy.

She will love to tell you about it!

HELP HER EAT RIGHT AND STAY IN SHAPE.

She will need to follow a balanced food plan.

This may mean changing some of your own eating habits.

Some exercise is good for both mother and baby.

Encourage her to exercise.

Try walking with her when you can.

Use this time to relax and talk about things together.

IT'S IMPORTANT THAT YOUR PARTNER STAY AWAY FROM ALCOHOL, CIGARETTES AND DRUGS WHILE SHE'S PREGNANT.

Help show your support by also cutting back or quitting during this time.

YOUR CHANGING ROLE

Later in the pregnancy, you will need to help your partner more.

Help her with housework, cooking and cleaning.

Make sure she gets a chance each day to put her feet up and relax.

Decide now who will do what after the baby comes.

Don't forget you are both in this together.

Plan to share both the work and the fun.

YOUR RELATIONSHIP

There will be changes between you and your partner.

For instance, you both may have mood swings.

You may feel sad, worried or nervous for no real reason.

Try to listen and help each other.

Take the time to talk things over.

Your sex life may also change.

In a normal pregnancy, it is safe to have intercourse through the end of the eighth month.

During the ninth month and for about six weeks after the baby comes, find other ways to be close besides intercourse.

Your doctor can give you advice in this area.

SOURCES OF HELP

If you have questions during the pregnancy or after your baby arrives, try the following:

TALK WITH FAMILY AND FRIENDS.

They are a great source for information and advice.

Don't be afraid to ask questions.

Remember, being a parent is something you learn.

READ UP ON THINGS YOU NEED TO KNOW.

There are many books on pregnancy and being a good parent.

Check with your library or bookstore.

TAKE CHILDBIRTH CLASSES.

- You and your partner can learn together what will happen during the pregnancy.
- Many hospitals offer free courses.
- Some private teachers give classes in their homes for a small charge.
- These classes can help answer any question you might have.
- They can also help you feel more confident about the pregnancy and becoming a parent.

KEEP A GOOD ATTITUDE!

- Few things will teach you as much about yourself as becoming a father.
- By being patient and keeping a good sense of humor, you are well on your way to being a good father.

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NINE MONTHS TO GET READY...YOU CAN MAKE A DIFFERENCE

WHAT YOU NEED FOR BABY'S FIRST WEEKS

The list below shows basic things you need to care for your baby.

You can add extra items if your budget allows.

Get the number you need based on your laundry facilities.

Try not to buy newborn sizes.

Your baby can quickly outgrow these sizes.

CLOTHING:	(Adjust the number needed depending on your laundry facilities. Avoid buying newborn sizes which your baby can quickly outgrow.)	
	Diapers	3 - 4 dozen (12 per day - if disposable)
	Shirts	4 - 6
	Sleeper, kimonos, nightgowns	4 - 6
	Waterproof pants	3
	Diaper pins	6
BEDDING:	Receiving blankets	4 - 5
	Flannel waterproof sheeting	3 - 4 (1 - 2 small ones to use as lap pads)
	Sheets	3 - 4
	Heavy blankets	2 - 3
BATHING:	Towels	2 - 3
	Wash clothes	4 - 6
	Mild soap / dish	1
	Cornstarch (for powder)	
	Oil or lotion	
BREAST FEEDING SUPPLIES:	Liquid vegetable cooking oil (for nipple care)	1 (small bottle)
	Handkerchiefs or clean cloths for leakage	5 - 6
	Support/nursing bra	2 - 3
	Small nursing bottle for drinking water	2 - 3 (4 ounce size)
	Boiled sterile water for drinking	1 gallon

FORMULA EQUIPMENT / SUPPLIES:	Nursing bottles and caps	8 - 10 (8 ounce size)
	Nipples	10 - 12
	Bottle and nipple brush	1
	Small pan for warming bottle	1
	Quart measuring cup	1
	Formula (as prescribed) in ready-to-feed, powdered or liquid concentrate form	1 week supply (then purchase as needed)
	Boiled sterile water for mixing with powdered or liquid formula concentrate and/or drinking for baby	1 gallon
	Can opener	1
	Measuring spoons	1 set

EQUIPMENT:	Crib / bed
	Diaper pail with cover
	Chest of drawers (top can be used as changing table)
	Fever thermometer to be used under the arm
	Rubbing alcohol / cotton balls for cord care
	Diaper bag for supplies
	Mobiles in bright colors for infant stimulation
	Infant carrier

Buy what you need ahead of time.

This will help you be ready to care more easily for your baby.

Buy other items as you need them.

Items do not need to be new - just clean.

Some good ways to get items are at garage sales and thrift stores.

Look for special baby sales in other stores.

Trade items with friends and family who can help you.

POST DELIVERY CHECK-UP

Your first checkup will be scheduled about 4-6 weeks after delivery.

Your post delivery checkup will include:

Blood pressure:

Your blood pressure will be checked to see if it is normal. (The extra blood produced to feed the baby and the placenta may have caused high blood pressure).

Anemia:

This is very important.

You may have had heavy bleeding during or after your delivery.

Breast examination:

Breasts will be checked for lumps and nipple problems.

Ask how to check your own breasts.

(If you are breast feeding, your breasts may feel hard and full.)

Vagina and Cervix:

You will be checked for healing, muscle tone and abnormal bleeding.

A Pap Smear may be done.

Uterus:

The size and shape of your uterus will be checked.

The uterus should be much smaller. It will never be as small as before you were pregnant.

Abdominal Exam:

Your muscle tone will be checked.

Your reproductive cycle:

You can get pregnant the first time you ovulate.

Birth control may be necessary before your first period.

Plans for future children should be discussed.

The first period, four to 10 weeks after delivery, may be heavy.

(If you are nursing your first period may be delayed.)

DISCUSSION

Your feelings and your partner's feelings may change.

Talk about them.

QUESTIONS:

You may have questions. This is a good time to ask them.

You may have questions about exercise, work, your health, your baby's health or other concerns.

Write your questions down so you won't forget them.

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POST-DELIVERY PERIOD (AFTER BIRTH)

You spent about nine months getting used to being pregnant.

Now you are a non-pregnant woman again—a MOTHER!

Being a mother is a big change in your life.

This is true even when you want the baby and are ready for it.

You may not have a "feeling of motherhood" right away.

That feeling develops as you and your baby get to know each other.

You may have mixed feelings about being a mother.

These feelings may be positive or negative.

Physical changes are part of adjusting.

It can take from six weeks to three months for your body to return to normal.

Right from the start, try not to over-burden yourself.

There are a number of things you may worry about.

Here are a few tips to help you:

SHARE YOUR CONCERNS WITH SOMEONE

Find a person who can share your concerns.

Try to get together with some of the women from your classes after you have your babies.

You are all going through the same stages together.

Experienced mothers can give good advice.

Just knowing that you are not alone can be a big help.

DON'T EXPECT TOO MUCH

You may feel that you are not sure of how to take care of a newborn.

All parents have to be "first timers" at infant care.

Be prepared to be un-prepared.

Be patient—you will learn by doing.

Most first-time parents have never seen a newborn baby before.

You should be ready for some surprises.

For example, you may not know why your baby is crying.

And at first the baby does not smile at you.

Your friends who are parents can tell you how their baby looked.

They also know how babies act the first few weeks.

Listen to the advice you get and then do what seems right to you.

Read about being a parent.

There are several good books that you can get.

Ask you health care team for suggestions.

IF PEOPLE OFFER HELP—ACCEPT IT!

This is a special time for you, the father, and the baby to be together.

You will be able to care for the baby.

But it is nice to have extra help at home.

Someone else can do the household chores.

Accept the fact that some things will not get done.

Be Careful:

Avoid lifting objects heavier than the baby.

Avoid climbing stairs the first few weeks.

TRY TO LIMIT YOUR VISITORS THE FIRST FEW WEEKS

Many people will want to see your new baby.

This can tire you out quickly.

Try to space the time between visitors.

You do not have to be a super hostess.

These visitors may want to help you!

Let them.

ADVICE WILL COME FROM EVERYONE

Listen to the well-meaning "advice givers" and then follow what seems sensible to you.

Do what fits into your lifestyle and your ideas about parenting.

DON'T IGNORE SIGNS OF BEING TIRED

Tune into the signs your body gives you about being tired.

Many women are surprised by how tired they feel during the first few months.

You cannot coax the baby's schedule.

You will have to adjust yours.

So try taking a nap or resting when the baby does.

IF YOU DO NOT FEEL WELL OR HAVE PAIN, CALL YOUR DOCTOR

It is normal to feel tired, but you should not feel sick.

If you have any of these problems call your doctor at once.

Very heavy or sudden increase in bleeding from your vagina (This would be more than a menstrual period. Soaking more than two sanitary napkins in a half-hour is heavy.).

A discharge from your vagina with a strong, unpleasant smell.

A temperature of 101° or higher.

Red and/or painful breasts.

Loss of appetite for a long period of time.

Pain, redness, tenderness and/or swelling of your legs.

Pain in your lower stomach or your back.

WEIGHT LOSS AFTER BIRTH IS SOMETHING MOST WOMEN WELCOME

It is normal to lose 10 to 15 lbs. right after birth.

This will depend on how much of the weight is water.

You will have more weight to lose, but diet later.

Your body needs a well-balanced diet to help you keep up your energy level and good health.

You have about seven pounds of fat stored in your body.

This gives you an energy reserve for about the first three months.

These extra pounds will gradually come off.

You need to eat properly and get adequate exercise.

If you are breast feeding, it is important for you to eat right. Your diet provides the nutrients your baby needs.

Your body will burn up to 1,000 calories a day just making milk.

You need to eat an extra 500 calories a day.

You also need to drink more fluid.

This helps your body make milk.

ASK YOUR HEALTH ADVISOR WHEN YOU SHOULD START YOUR POST-DELIVERY EXERCISE

Exercise is a must to get your body's tone and flexibility back.

Exercise on a regular basis.

Try to do your prenatal exercises.

The ones to strengthen your stomach and to relax are good.

BIRTH CONTROL IS NEEDED

Breast feeding or not having your period will not protect you from getting pregnant.

If you are breast feeding, you should not use the birth control pill.

Your partner can use condoms.

You can use birth control foam or jelly.

Ask your doctor about other choices at your post delivery checkup.

"BABY BLUES" IS NOT A JOKE

It is normal to feel blue and a little let down after the excitement of pregnancy and delivery.

"Baby blues" usually lasts no longer than a week or two.

Your hormones are in a state of flux after the birth of your baby.

They are a major reason why you feel blue.

Your changing role with your partner and the baby's constant needs all can add to the "baby blues."

You might resent the ways the baby has changed your life.

This could make you feel angry and guilty.

It is a normal feeling that all parents have.

Talk to your doctor if feeling "blue" concerns you.

TWO IS COMPANY, THREE'S A CROWD.

Now there is a new person in your lives.

The baby will change the way both of you feel about yourselves.

It may change how you relate to each other.

Making the change from "couple" to "family" can cause some tensions.

A man often feels that the baby gets all the attention.

He may feel somewhat left out.

Talking with each other can prevent some problems and solve others.

It is sometimes hard for other children to accept the new baby.

They may think the baby is taking away all their mother's attention.

Set aside a special time for the other children.

FINALLY, KEEP YOUR SENSE OF HUMOR

There will be good days and bad days.

Do whatever you can to enjoy your new baby.

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Baby Bill of Rights

TALK TO ME.
Sing, hum, babble, or even read the funnies to me! I don't know exactly what you're saying, but I need to hear you. And I do know what you mean, even if I may not know words. Like your voice tones mean, "I love you." Or when you yell, I hear, "You're a pest!" Unless you communicate with me, how can I learn? I learn from you.

HOLD ME.
Everything is so big and new to me. I don't understand where I am. Or who I am. And I get scared. But when you hold me, I feel better. Your warmth warms me. Your breath and heartbeat make me feel I belong. Belong here. Belong to you.

ANSWER MY CRY.
I don't cry to get you upset. Or to get you mad. I cry because I can't tell you how I feel any other way. Maybe I'm cold...or wet...or hungry...or scared and lonely. Answer my cries. You'll soon know what each one means. You won't spoil me. You'll help me to be a better baby...and to make you happier, too.

LOVE ME.
Like me. Love me just as I am. Don't expect me to do what I can't do. Like being toilet-trained. My muscles aren't ready yet. I know I'm messy. But I'm growing. Overlook my baby weaknesses. You're the most important person in my world. I can't make it without you. So get to know me. Have fun with me. And love me...just as I am.

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WORD KEY

abdomen [AB-duh-mun]
abdomen [ab-DOH-mun]
abortion [uh-BORSH-un]
aerosol [AIR-uh-sol]
allergies [AL-ur-jeez]
amniocentesis [am-nee-oh-sen-TEE-sis]
amniotic fluid [am-nee-OT-ik FLOO-id]
amniotic sac [am-nee-OT-ik sak]
anemia [uh-NEE-mee-uh]
antibodies [AN-ti-bod-eez]
caffeine [ca-FEEN]
calorie [CAL-uh-ree]
calories [CAL-uh-reez]
cartilage [CAHR-tl-ij]
colostrum [kuh-LOSS-trum]
constipated [CON-sti-pay-ted]
constipation [con-sti-PAY-shun]
diabetes [dye-uh-BEE-teez]
diarrhea]dye-uh-REE-uh]
digest [di-JEST]
digestion [di-JES-chun]
examination [ig-ZAM-i-NAY-shun]
fatigue [fuh-TEEG]
fetascope [FEE-toh-skohp]
fluid [FLOO-id]
hemoglobin [HEE-moh-gloh-bin]
hormones [HOR-monz]
infections [in-FECT-shunz]
intestinal [in-TES-tin-ul]
jaundice [JAWN-dis]
lanugo [luh-NOO-goh]
linea negra [LIN-ee-uh NAY-gruh]
medications [MED-i-cay-shunz]
menstrual [MEN-stroo-ul]
miscarriages [mis-CAIR-ij-ez]
mucus [MEW-cus]
nausea [NAW-zee-uh]
negative [NEG-uh-tiv]
nervous [NUR-vus]
nutrient [NEW-tree-unt]
nutrients [NEW-tree-untz]
oxygen [ox-uh-jun]
pelvic [PEL-vik]
pesticides [PES-tuh-sidez]
placenta [pluh-SEN-tuh]
positive [POZ-i-tiv]
pregnancy [PREG-nun-see]
protein [PROH-teen]
rubella [roo-BEL-uh]
secretion [see-CREE-shun]
sonogram [SAWN-o-gram]
stethescope [STETH-uh-skohp]
stimulant [STIM-yuh-lunt]
susceptible [sus-SEP-ti-bl]
testicles [TES-tuh-kulz]
tissue [TISH-oo]
toxemia [tox-SEE-mee-uh]
tract [TRACT]
umbilical [um-BIL-uh-kul]
urination [YOOR-uh-NAY-shun]
urinary [YOOR-un-hair-ee]
uterus [YOO-tuh-rus]
varicose [VAIR-uh-kohs]
vitamin [VYE-tuh-min]
vitamins [VYE-tuh-minz]

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